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COVER LETTER

TO:

TO: Registration Sec Division of Corp			
	Guardian LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Joshua C Booze		
		Name of Person	
	Gulf Coast Guardian LLC		
		Firm/Company	
	34330 Bermont Road		
		Address	
	Punta Gorda, Fl. 33982		
	 +	City/State and Zip Code	
	gulfcoastguardianllc@gmai		·.*
		to be used for future annual report not	ification)
For further information e	oncerning this matter, please co	all;	
Joshua C Booze		941 889-8689 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 9		<u>Street Address:</u> Registration Sc	ection
Division of C		Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monre	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gulf Coast Guardian LLC				
(<u>Name of the Limit</u>	ed Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Life Horida document number L20000244855	iability Company	were filed on $\frac{08.12/2020}{}$		and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
Gulf Coast Guardian Inspections LLC		-		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	n "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:		34300 Bermont Road	:- :- :-	202
(Principal office address MUST BE A STREET ADDRESS)		Punta Gorda, FL 33982	- () - (2)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		34300 Bermont Road		.ED
		Punta Gorda, FL 33982		2:
B. If amending the registered agent and/or ragent and/or the new registered office addre		address on our records,	enter the name of	the new regi
Name of New Registered Agent:	Joshua C Booz	e		
	34300 Bermon	t Road		
New Registered Office Address:			t address	
New Registered Office Address:		Enter Florida street		
New Registered Office Address:	Punta Gorda	i;nter Florida street	, Florida	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			Change
			⊔Add
			□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
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			□Add
			□Remove
			□Change

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record specifies a delayed e The 90th day after the recor		ut not an effe	ctive time, at :	.2:01 a.m. on t	he earlier o
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